

**JIMENEZ OID
AREAS OF CONCERN
13-034 | P13-133894**

Date Occurred: September 13, 2013
Time of Occurrence: 2108 Hours
Decedent: Hector Enrique Jimenez
Location: 2395 10th Street, Riverside

AREAS OF CONCERN RAISED BY CPRC MEMBERS DURING THE DELIBERATIONS OF THE JIMENEZ OID REVIEW

The Commission was concerned about the control of the situation by the supervisor at the scene. This would include the number of officers that jumped the fence and formed the semi-circle around Jimenez while he sat on the bench, as well as the number of officers initially shouting orders / directives out to Jimenez. This appeared to have been exacerbated by the K-9s incessant barking. The Commission felt that all of this combined may have heightened Jimenez' state of mind.

It would likely have helped the situation if another supervisor was on the scene who could have handled the tactical portion and response since the initial supervisor was busy negotiating. On the other hand, the Commission wondered if perhaps Sgt. Toussaint could have designated one officer to handle the negotiation and then handled the tactical part.

The Commission was concerned about the presence of the less lethal shotgun within a distance of close proximity to Jimenez that would not allow the weapon to be considered less lethal. It was used and certainly proved that at close distance it can certainly be lethal.

The Commission felt that when Sgt. Toussaint took over the primary role of negotiator, it became less chaotic. However, the K-9 continued the incessant barking and this may have kept Jimenez' heightened state of mind chaotic.

The Commission felt that the family could have been removed from the residence a little sooner in order to take away the potential threat of harm to them should Jimenez have had the ability to get back inside.

SUGGESTIONS / CONSIDERATIONS:

- Location history needs to be obtained and delivered to officers while en route to calls in a timely manner.
- On all calls received by RPD dispatch when it can be determined that the situation involves a possible suicidal suspect or someone having a mental health event, if on duty, the RPD Mental Health Team should be dispatched to the call. Additionally, two supervisors of sergeant rank or above should be dispatched to the call.

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This will allow one of the supervisors to assess and manage the scene and the other one to manage the tactical deployment of resources and implementation of an operational plan while in communication with the on-scene supervisor / commander.

- That RPD continue the training and education currently in place on how to recognize the signs of mental illness, and how best to respond so that **all parties remain safe** (the suspect, officers, and bystanders).
- Less-lethal options need to be in place if safe to do so. Appropriate distance needs to be used – Taser closer, shotgun more distant. (This again is not as timely due to length of OID review.)
- Officers should do their best, given their training, education and experience, to approach any subject who has any hint of a mental health issue to contain the suspect within a given and visible area, speak softly to the suspect, and focus on slowing all events down in order to give the suspect some time to deal with the reality of his or her situation. Perhaps, and if tactically sound, and depending of course upon the situation, give a potentially mentally ill person some additional space between the responding officer(s) and himself so as to not make the mentally ill or suicidal person feel threatened. Of course, if there is an immediate threat, then the officers must respond by using whatever means is necessary for the safety of everyone involved.